

PROGRESS SHEET - APPLICATION FOR WATER RIGHT

☐ SURFACE WATER ☒ GROUND WATER

NAME: **Mr. Gene Kaplan**
Mrs. Margaret Kaplan
 316 West Watt Road
 Spangle, Washington 99031-9753
 509-245-3481

☐ ASSIGNED (SEE BACK OF PAGE)

SPOKANE COUNTY

WRIA

56

WRTS No. **G3-30540**

ID No. **4454397**

APPLICATION NO.: **G3-30540**

PRIORITY DATE: **August 1, 2007**

Date App rcvd: **August 1, 2007** Date fee rcvd: **8-1-2007** Amount **\$50.00** Check No.: **1092**

Returned for completion or correction: _____ Rcvd: _____

Statement of additional exam. fee: Rcvd: _____ Amount \$ _____ Check No.: _____

☒ Application mapped by: **Q Durrell** date: **8-20-2007**

PUBLICATION:

Newspaper(s): **Spokesman Rievew**

☒ SPOTTED
KP

OK'd by: **K.A.Ryf** Date Notice Sent **8-31-2007**

Date Affidavit rec'd: **9-28-2007 HQ**

Time expires: **10-12-2007**

Checked by: **K.Ryf**

Date: **10-1-2007**

☐ Protests: _____

☐ Fee rec'd: _____

☐ Field Packet sent: _____ by: _____

INTERESTED PARTIES:

☐ WDFW ☐ State DOH ☐ County DOH ☐ Tribe ☐ USBR ☐ W²FO ☐ EphrataFO ☐ _____

WDFW COMMENT: ☐ YES ☐ NO Note: _____

FISH SCREEN: ☐ YES ☐ NO LOW FLOW PROVISIO: ☐ YES ☐ NO

OTHER COMMENT(S): _____

FIELD EXAMINATION REQUIRED: ☐ YES ☐ NO

EXAMINATION DATE	ROE ISSUED	SUP. ROE ISSUED	PERMIT ISSUED	SUP. PERMIT ISSUED
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☐ ROE map checked by: _____ date: _____

☐ Permit map checked by: _____ date: _____

DEVELOPMENT SCHEDULE:

BC due: _____ EXT to: _____ BC filed: _____

WELL LOG(S) RECEIVED: ☐ YES ☐ NO Note: _____

CC due: _____ EXT to: _____ CC filed: _____

PA due: _____ EXT to: _____ PA filed: _____

METER INSTALLED: ☐ YES ☐ NO Meter ID No.: _____

FISH SCREEN INSTALLED: ☐ YES ☐ NO Note: _____

PA FIELD EXAMINATION REQUIRED: ☐ YES ☐ NO

Date examination made: _____ By: _____

APPROVED FOR CERTIFICATE: ☐ YES ☐ NO

Cert. fee: \$ _____ Date letter sent: _____ Fee rec'd: _____ Check No.: _____

☐ Certificate map checked by: _____ date: _____ Date Certificate issued: _____

cc:

ASSIGNMENT INFO:

SUBJECT TO REAL ESTATE EXCISE TAX

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

☐ Copy of Application/ROE/Permit sent to assignee: _____

Submitted to Department of Revenue

Date: _____

Initial: _____

Assignment received: _____

Assignment approved: _____

Assignee: _____

Address: _____

Phone #: _____

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